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Bib Data Sheet

<b>SERIAL NUMBER</b> 10/772,397	<b>FILING OR 371(c) DATE</b> 02/06/2004 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> 54644-037	
<b>APPLICANTS</b> Joan M. Cory, Bozeman, MT; Philip C. Cory, Bozeman, MT;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/989,206 11/21/2001 PAT 6,706,016					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/06/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MT	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 26633					
<b>TITLE</b> Nerve stimulator output control needle with depth determination capability and method of use					
<b>FILING FEE RECEIVED</b> 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		